## CITY OF LAFAYETTE NON-RESIDENTAL APPLICATION

		PERMIT # BUILDING PERMIT #
PERMIT TYPE:	SANITARY	STORM
BUSINESS NAME:		OWNER NAME:
SERVICE ADDRESS:		CONTACT PERSON:
MAILING ADDRESS: (if different)		
	(City, State, Zip)	PHONE NUMBER: ( )
	CONTRACTOR:	
	ADDRESS:	
	PHONE NUMBER: (	City, State, Zip
TYPE OPERATION:		UNITS BRMS INDUSTRIAL (describe type)
Is toxic or high strength dis	SANITARY Secharge expected? 5-21) YES	
THE UNDERSIGNED OWN	IER OF LOT NOI	N ADDITION, BEING
NOON THE	SIDE OF	(Street) BETWEEN
(Intersecting Street)	AND	(Intersecting Street) OCCUPIED AS
		PREMISES, HEREBY MAKES APPLICATION FOR A PERMIT TO
MAKE A CONNECTION W	ITH A (PUBLIC/PRIVATE) S (Circle One)	EWER LYING IN APPLICANT
CONSTRUCTION GUIDELIN CONSIDERATION OF G	LL CONSTRUCTION WILL F INES AND POLICIES, NOW O RANTING OF THIS APPLICA MAY IN ANYWISE RESULT	BE IN STRICT ACCORDANCE WITH CITY ORDINANCES, OR HEREAFTER TO BE IN FORCE. APPLICANT FURTHER AGREES ATION, THAT THE CITY WILL BE HELD HARMLESS FROM ANY FROM, OR BE OCCASIONED BY, THE CONSTRUCTION, USE OR
DATE:		SIGNATURE:
		TITLE:(Owner or Authorized Representative ONLY)
UTILITY USE ONLY: DRAWING APPROVED PRIVATE SEWER AUTH EASEMENT STATEMEN GREASE TRAP REQUIR ANNEXATION WAIVER PARTICIPATION FEE RI	ED REQUIRED	NOYESN/ANOYESN/ANOYESN/ANOYESN/ANOYESN/ANOYESN/A
The above application hat the City system.	s been determined (to be)	(not to be) an Industrial User and is approved for connection to
DATE:		SIGNATURE:

Revised: 9/96

Utility Representative